ARIZONA SCHEDULE A(PY)

Itemized Deductions For Part-Year Residents

Attach to your return

	Attach to your return				
NAME(S) AS SHOWN ON FORM 140PY		YOUR SOCIAL	SECURITY	NUMBER
			SPOUSE'S SO	CIAL SECU	RITY NUMBER
Medic	al and Dental Expenses • Taxes • Interest Expense • Gifts to Charity				
1	Medical and dental expenses incurred and paid while an Arizona resident plus the amount of such expenses incurred and paid while an Arizona resident plus the amount of such expenses.				
	sources that you incurred and paid during the part of the year while an Arizona nonresident			1	00
2	Taxes allowable on federal Form 1040, Schedule A, that you incurred and paid while an Arizona reside				00
•	of such taxes from Arizona sources that you incurred and paid during the part of the year while an Arizona			2	00
3	Interest expense: See instructions.			3	00
4	Gifts to charity allowable on federal Form 1040, Schedule A, that you incurred and paid while an Arizon		•		00
	amount of such gifts from Arizona sources that you incurred and paid during the part of the year while a	n Arizona	a nonresident	4	00
	lty and Theft Losses				
5	Casualty loss(es) allowable on federal Form 1040, Schedule A, after applying the 10% federal			-	
	adjusted gross income limitation and the \$100 per loss floor	5	00	1	
6	Casualty loss(es) allowable on federal Form 4684 before applying the 10% federal adjusted gross				
	income limitation and the \$100 per loss floor	6	00	4	
7	Amount of loss on line 6 incurred while you were an Arizona resident plus the amount of loss from				
	Arizona sources on line 6 that you incurred during the part of the year while an Arizona nonresident	7	00	1	
8	Divide line 7 by line 6, and enter the percentage	8	%		
9	Multiply line 5 by the percentage on line 8			9	00
Job E	xpenses and Other Miscellaneous Expenses				
10	Miscellaneous expenses subject to the 2% federal adjusted gross income limitation allowable on]	
	federal Form 1040, Schedule A, before applying the limitation	10	00]	
11	Amount on line 10 that you incurred and paid while an Arizona resident plus the amount on line 10 from				
	Arizona sources that you incurred and paid during the part of the year while an Arizona nonresident	11	00		
12	Divide line 11 by line 10, and enter the percentage	12	%		
13	Miscellaneous deductions subject to the 2% federal adjusted gross income limit allowable on federal				
	Form 1040, Schedule A, after applying the limitation	13	00		
14	Multiply line 13 by the percentage on line 12	14	00		
15	Other miscellaneous expenses allowable on federal Form 1040, Schedule A, not subject to the 2%				
	federal adjusted gross income limitation that you incurred and paid while an Arizona resident plus the				
	amount of such expenses from Arizona sources that you incurred and paid during the part of the year				
	while an Arizona nonresident	15	00		
Skip lin	es 16 through 20 if not deducting gambling losses.				
-	Wagering losses included on line 15	16	oc		
17	Total gambling winnings included in your Arizona gross income	17	00		
18	Authorized Arizona lottery subtraction from Form 140PY, page 2, line D32	18	00		
19	Maximum allowable gambling loss deduction: Subtract line 18 from line 17	19	00		
20	If line 19 is less than line 16, subtract line 19 from line 16; otherwise enter "zero"	20	00		
21	If you completed lines 16 through 20, subtract line 20 from line 15. If you skipped lines 16 through				
	20, enter amount on line 15 here	21	00		
22	Add lines 14 and 21			22	00
	temized Deductions				
23	Tentative Arizona itemized deduction: <i>Add lines 1, 2, 3, 4, 9, and 22.</i> If your federal adjusted gross				
	income is more than \$142,700 (\$71,350 if married filing separately), complete lines 24 through 28				
	below. Otherwise, enter the amount on line 23 on Form 140PY, page 1, line 21	23	00	1	
24	If your federal adjusted gross income is more than \$142,700 (\$71,350 if married filing separately),			1	
	enter on line 24 the amount by which you have to reduce your federal itemized deductions because				
	your federal adjusted gross income was over this threshold	24	00		
25	Enter your total federal itemized deductions allowable on federal Form 1040, Schedule A, prior to the			1	
	federal adjusted gross income limitation	25	00		
26	Divide line 23 by line 25, and enter the percentage	26	%	1	
27	Multiply line 24 by the percentage on line 26, and enter the result	27	00	1	
28			•	28	00

ARIZONA FORM 140PTC

Property Tax Refund (Credit) Claim You must file this form, or Form 204, by April 15, 2005.

2004

95	Check this box if amended for year 2004							
<u>Y</u> (DUR FIRST NAME AND INITIAL	LAST N	AME		YOU	UR SOCIAL SECURITY NO.		
L	1						1	
_	A JOINT CLAIM, SPOUSE'S FIRST NAME AND INITIAL	LAST N	AME		SPO	JSE'S SOCIAL	SECURITY NO.	
_=	ESENT HOME ADDRESS - NUMBER AND STREET, RURAL ROUTE APT. NO.	DAYTIM	IE PHONE		YOU	R DATE OF BIR	<u> </u>	
_		()				YIYIYIY	
НС	DME ADDRESS CONTINUED	HOME F	PHONE		<u> </u>			
$\sqrt{2}$		94 ()				
_	TY, TOWN OR POST OFFICE STATE ZIP CODE				FOR DOR USE	ONLY		
<u></u>	3							
Qu	alifications for Credit (Check the boxes that apply):		Rent	Own				
4	On December 31, 2004, were you renting or did you own?							
_	If you own a mobile home but rent the space, check "Rent"	' 4						
5	Were you an Arizona resident for all of 2004? If "No",	_	Yes	No	88			
•	STOP. You do not qualify				<u> </u>			
ь	Did you pay property taxes on your home, pay rent, or pay combination of both in 2004? See instructions for	а			81			
	qualifications. If "No", STOP . You do not qualify	6			82 CHECK ONE if filing und	er an exte	nsion:	
7	Is this the only Property Tax Refund being claimed in your	0			4 m	onth exten	sion 82D	
•	household? If "No", STOP . You do not qualify	7			6 m	onth exten	sion 82F 🗌	
8	Were you age 65 or older in 2004? Enter your birth date in							
	box 79 above	8						
9	Did you receive Title 16, SSI payments in 2004? If "Yes",							
	attach proof. If you answered "No" to both 8 and 9,							
_	STOP. You do not qualify.	9						
			Inco	-	wat frame was O. Davit I live at 1 and	4 40	00	
			Cred		mt from pg 2, Part I, line J, col	4 10	00	
					ved alone, enter credit from Sc	h l		
					eck this box11a \Box	"		
					lidn't live alone, enter credit from	n		
					and check this box11b	11	00	
			12 If	you o	wn your property, enter proper	:y		
			ta	axes p	aid during 2004. (Attach proof)		00	
					ented, enter tax from <i>Form 201</i>		00	
i					Add lines 12 and 13		00	
<u>_</u>	Marian basis basis deimand as a demandant an annuar alas?		-		edit: Smaller of line 11 or line 1	4. <mark>15</mark>	00	
16	If you have been claimed as a dependent on anyone else's	tax re		-	_			
	Name of taxpayer who claimed you:		3	OCIAI (Security No.:			
	Address:		_					
17	Credit for increased excise taxes from Form 140PTC, pag	e 2, P	art II.	line 6		. 17	00	
	Enter the number from page 2, Part II, line 2, here					,		
19	Total Credit: Add lines 15 and 17, and enter the total. Se	e pag	e 5 of	the ins	structions if you have to file			
	Arizona Form 140 or Form 140A Direct Deposit of Refund: See page 5 of instructions.					. 19	00	
	ROUTING NUMBER ACCOUNT NUMBER	1 1	1 1	1 1	C = Checking or			
	98				Savings Savings			
	nis is your first claim for 2004, STOP HERE AND GO TO							
	amended claim, complete lines 20 through 22, and chec	k the	box a	t the t	op of the form.			
	ENDED Enter the amount from line E of the worksheet on page 6 or	f tha i-	otruct	iono		20	00	
	Enter the amount from line 5 of the worksheet on page 6 or Additional refund: If line 19 is larger than line 20, <i>subtract</i> if						00	
	Amount to pay: If line 19 is less than line 20, <i>subtract line</i>					. [-1]	00	
	Arizona Department of Revenue; include SSN on payment				· ·	. 22	00	

Form 140PTC (2004) Page 2 of 2

Part I Schedule of Household Income		(1) YOU	(2)	(3) OTHER PERSONS	(4) TOTAL (1+2+3)
		100	TOUR SPOUSE	OTHER PERSONS	101AL (1+2+3)
A Salaries, wages, tips, etc., received in 2004	Α				
B Dividend and interest income received in 2004	В				
C Business and farm income	С				
D Gain or loss from sale or exchange of property	D				
E Pension and annuity income. Include Arizona state and local					
retirement benefits, civil service, and military retirement. Do					
not include social security or railroad retirement benefits	Е				
F Rent and royalty income	F				
G Partnership, estate, and trust income	G				
H Alimony	Н				
I Other Income: Specify source on separate sheet	ı				
J Total household income: Add lines A through I in column 4.					
Enter here and on the front of this form, line 10	J				

Use the amount on line J, column 4, to compute your credit from the proper schedule below.

If yo	2004 Sc	hedule I use this Schedule.		2004 Schedule II If you live with your spouse or another person, use this Schedule.					
Household	Tax	Household	Tax	Household			Tax		
Income	Credit	Income	Credit	Income			Credit		
\$ 0 - 1,750	\$502	\$ 2,751 - 2,850	\$256	\$ 0 - 2,500	\$502	\$ 4,001 - 4,150	\$256		
1,751 - 1,850	479	2,851 - 2,950	234	2,501 - 2,650	479	4,151 - 4,300	234		
1,851 - 1,950	457	2,951 - 3,050	212	2,651 - 2,800	457	4,301 - 4,450	212		
1,951 - 2,050	435	3,051 - 3,150	189	2,801 - 2,950	435	4,451 - 4,600	189		
2,051 - 2,150	412	3,151 - 3,250	167	2,951 - 3,100	412	4,601 - 4,750	167		
2,151 - 2,250	390	3,251 - 3,350	145	3,101 - 3,250	390	4,751 - 4,900	145		
2,251 - 2,350	368	3,351 - 3,450	123	3,251 - 3,400	368	4,901 - 5,050	123		
2,351 - 2,450	345	3,451 - 3,550	100	3,401 - 3,550	345	5,051 - 5,200	100		
2,451 - 2,550	323	3,551 - 3,650	78	3,551 - 3,700	323	5,201 - 5,350	78		
2,551 - 2,650	301	3,651 - 3,750	56	3,701 - 3,850	301	5,351 - 5,500	56		
2,651 - 2,750	279	3,751 and up	0	3,851 - 4,000	279	5,501 and up	0		

Enter the amount of credit on the front of this form, line 11.

Part II Credit for Increased Excise Taxes

Do not complete Part II if you completed line 16 on page 1 of Form 140PTC. Do not complete Part II if you were sentenced for at least 60 days of 2004 to a county, state, or federal prison.

1 List dependents. See page 5 of the instructions.

					NO. C	OF MONTHS	LIVED	
	FIRST AND LAST NAME	SOCIAL SEC	URITY NO.	RELATIONSHIP	IN YC	IN YOUR HOME IN		
1a	ı							
1k								
10	:							
2	Enter total number of dependents listed on I	ines 1a through	C			2		
3	If you are married filing a joint claim, enter the	ents listed on lines 1a through 1c						
4		4						
5	Multiply the amount on line 4 by \$25, and er	nter the result				5	2 3 3 4 5 00 6 00	
6	Enter the smaller of line 5 or \$100. Also, en	are married filing a joint claim, enter the number "2" here. Otherwise, enter the number "1" 1 are married filing a joint claim, enter the number "2" here. Otherwise, enter the number "1" 4 are married filing a joint claim, enter the number "2" here. Otherwise, enter the number "1" 5 are married filing a joint claim, enter the number "2" here. Otherwise, enter the number "1" 5 are married filing a joint claim, enter the number "2" here. Otherwise, enter the number "1" 5 are amount on line 4 by \$25, and enter the result	6	00				

ш	I have read this claim and an they are true, correct and con any knowledge.	y attachments with mplete. Declaratio	h it. Under penalties of perjury, I declare that to the best of my knowledge and belief, on of preparer (other than taxpayer) is based on all information of which preparer has
N HERE	YOUR SIGNATURE		DATE
E SIGN	SPOUSE'S SIGNATURE		DATE
PLEASE	PAID PREPARER'S SIGNATURE		FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED)
	PAID PREPARER'S TIN	DATE Arizona Departme	PAID PREPARER'S ADDRESS ent of Revenue, PO Box 52138, Phoenix, AZ, 85072-2138.

ARIZONA FORM 140NR

Nonresident Personal Income Tax Return

For the year January 1 - December 31, 2004,

2004

or other tax year beginning [M M	<u> D D 2 0 0 4</u> and	ending MMDD120	0 5].	66	
YOUR FIRST NAME AND INITIAL	LAST NAME	Υ	OUR SOCI	IAL SECURITY NO).
1					
IF A JOINT RETURN, SPOUSE'S FIRST NAME AND INITIAL	LAST NAME	S	POUSE'S	SOCIAL SECURIT	Y NO.
	T. NO. DAYTIME PHONE: (1		IMPORTANT	
2	94 HOME PHONE: ()		ust enter your	
CITY, TOWN OR POST OFFICE STATE ZIP CODE	HOWE PHONE. (FOR DOR			00113.
3					
4 Married filing joint return					
5 Head of household - name of qualifying child or dependent of the second of the seco	ent:				
6 Married filing separate return. Enter spouse's Social Se		1_			
and full name here. ▶		88			
7 Single					
8 Enter the number claimed. Do not put a check mark. Age 65 or over (you and/or spouse) 10 Refer the number claimed. Do not put a check mark. Dependents. From page 2, line A2 - do not be compared to the number of the number o		81	80		
9 claimed. Do Blind (you and/or spouse)		82 CHECK ONE if filing un	der an e	extension:	
10 Dependents. From page 2, line A2 - do not i	include self or spouse.		4 mon	th extension	82D
¥		L		th extension	82F
11-13 Residency Status (check one): 11 Nonresident 1 14 Federal adjusted gross income (from your federal return)			00		
14 Federal adjusted gross income (from your federal return)				15	00
16 Additions to income (from page 2, line C20)				16	00
16 Additions to income (from page 2, line C20)				17	00
18 (This line not used.)				.,	
19 Subtractions from income (from page 2, line D31). Enter the n	umber from line D29a. 191			19	00
19 Subtractions from income (from page 2, line D31). Enter the n 20 Arizona adjusted gross income. Subtract line 19 from line 17 21 Deductions. Check box and enter amount. See instructions.				20	00
21 Deductions. Check box and enter amount. See instructions	s, pages 11 and 12. 21 C	☐ ITEMIZED 21S ☐ STANDA	ARD	21	00
22 Personal exemptions. See page 12 of the instructions				22	00
23 Arizona taxable income. Subtract lines 21 and 22 from line 20				23	00
22 Personal exemptions. See page 12 of the instructions				24	00
5 Tax from recapture of credits from Arizona Form 301, line 31				25	00
26 Subtotal of tax. Add lines 24 and 25				26	00
27 - 28 Clean Elections Fund Tax Reduction. See instructions, page 29 Reduced tax. Subtract line 28 from line 26	age 13. 27 1 L	」YOURSELF 272□ SPOUSE	·	28	00
29 Reduced tax. Subtract line 28 from line 20	1 202 if Farm 201 is not requ	d		30	00
is 31 Credit type. Enter form number of each credit claimed:	1 323 FOIIII 30 18 110t feqt	[3 [3		30	00
21 Stephan Ste				32	00
g 33 Balance of tax. Subtract lines 30 and 32 from line 29. If the su	um of lines 30 and 32 is mor	e than line 29. enter zero		33	00
				34	00
35 Arizona estimated tax payments for 2004				35	00
36 Amount paid with 2004 Arizona extension request (Form 204).				36	00
Elat Melandable credits. Check box(es) and enter amount(s). 31A				37	00
38 Total payments/refundable credits. <i>Add lines 34 through 37</i>				38	00
ਤੁੰ 39 TAX DUE. If line 33 is larger than line 38, subtract line 38 from	n line 33, and enter amount	of tax due. Skip lines 40, 41 and 4	12	39	00
				40	00
41 Amount of line 40 to be applied to 2005 estimated tax				41	00
42 Balance of overpayment. Subtract line 41 from line 40				42	00
Arizona Wi	ildlife 44 00 c	Citizens Clean Elections 45	00		
Child Abuse Prevention 46 00 Domestic Violence Sh		Neighbors Helping Neighbors	00		
Special Olympics 49 00 Politica	al Gift 50	Neignbors (1991)			
43 - 50 Voluntary Gifts to: Aid to Education (entire refund only) Child Abuse Prevention Special Olympics 51 Check only one if making a political gift: 511 Democratic 512 Estimated payment penalty and MSA withdrawal penalty		lican			
52 Estimated payment penalty and MSA withdrawal penalty	· ·			52	00
53 Check applicable boxes: s31 Annualized/Other s32 Farm					130
				54	00
55 REFUND. Subtract line 54 from line 42. If less than zero, enter Direct Deposit of Refund: See instructions.				55	00
ROUTING NUMBER ACCOUNT NUMBER		C Checking			
98		Savings Savings			
56 AMOUNT OWED. Add lines 39 and 54. Make check payable	e to Arizona Department o	f Revenue; include SSN on payı	ment.	56	00

Form 140NR (2004) Page 2

PART A: Dependents - do not list yourself or shouse

PAR	A: Dependents - do not list yourself or spou	ise									
A 1	List children and other dependents. If more space is need	led, attach a	separa	ate sheet.				NO	. OF	MONTHS LIVED	
	FIRST AND LAST NAME			RITY NO.	REL	ATION	ISHIP	IN Y	IN YOUR HOME IN 2004		
A2	Enter total number of persons listed in A1 here and on the	front of this	form. b	ox 10			TOTA	AL T	A2		
A 3	Enter the names of the dependents listed above who do n								-		
	<u> </u>	. ,	_	·	,						
PAR	B: Arizona Percent of Total Income						2004 FEDERAL	L		2004 ARIZONA	
						Amo	unt from federal	returr	<u>n</u>	Source amount only	
B4	Wages, salaries, tips, etc					B4		00		00	
B 5	Interest					B5		00		00	
B6	Dividends					В6		00		00	
B7	Arizona income tax refunds					В7		00		00	
B 8	Business income (or loss) from federal Schedule C					B8		00		00	
B 9	Gains (or losses) from federal Schedule D					В9		00	5	00	
B10	Rents, royalties, partnerships, estates, trusts, small busine					B10		00	5	00	
B11	Other income reported on your federal return					B11		00		00	
B12	Total income: Add lines B4 through B11					B12		00		00	
B13	Other federal adjustments. Attach your own schedule					B13		00		00	
B14	Federal adjusted gross income. Subtract line B13 from lin	e B12 in the	FEDE	RAL column		B14		00	์ ס		
B15	Arizona income: Subtract line B13 from line B12 in the AF	RIZONA colu	mn. Er	nter here and							
	on the front of this form on line 15							[B15	00	
B16	Arizona percentage: Divide line B15 by line B14, and enter	er the result	(not ove	er 100%)					B16	%	
PAR	C: Additions to Income										
C17	Early withdrawal of Arizona Retirement System contribution	ns						[C17	00	
C18	Total depreciation included in Arizona gross income								C18	00	
C19	Other additions to income. See instructions and attach yo								C19	00	
C20	Total: Add lines C17 through C19. Enter here and on the								C20	00	
PAR	D: Subtractions from Income									•	
D21	Exemption: Age 65 or over. Multiply the number in box 8,	page 1, by	\$2,100			D21		00			
D22	Exemption: Blind. Multiply the number in box 9, page 1, k					D22		00			
D23	Exemption: Dependents. Multiply the number in box 10,					D23		00			
D24	Total exemptions: Add lines D21 through D23					D24		00			
D25	Multiply line D24 by the percentage on line B16, and enter				_				D25	00	
D26	Interest on U.S. obligations such as U.S. savings bonds a	nd treasury l	oills inc	luded in the A	RIZONA col	lumn		[D26	00	
D27	Arizona state lottery winnings included on line B11 in the A	RIZONA col	lumn (u	ıp to \$5,000 o	nly)			[D27	00	
D28	Agricultural crops contributed to Arizona charitable organization								D28	00	
D29	Construction of an energy efficient residence. See page 9								D29	00	
D30	Other subtractions from income. See instructions and atta	ach your owr	n sched	lule				[D30	00	
D31	Total: Add lines D25 through D30. Enter here and on the	front of this	form, li	ne 19				[1	D31	00	
	-							•			
Part	E: Last Name(s) Used in Prior Years if differe	nt from na	ame(s	s) used in o	current ve	ear					
E32	· ,		`	,	•						
LJZ	-										
	I have read this return and any attachments with it. Under and complete. Declaration of preparer (other than taxpaye	penalties of	perjury	, I declare tha	t to the best	t of my	knowledge and	belie	f, the	y are true, correct	
Щ	and complete. Declaration of preparer (other than taxpaye	er) is based o	on all in	formation of v	vhich prepai	rer has	s any knowledge.				
岸	► NOUN CLOUDE IN			D.175							
Z	YOUR SIGNATURE			DATE							
SIG	SPOUSE'S SIGNATURE			DATE							
SE	OF OUSE S SIGNATURE			DAIE							
PLEASE SIGN HERE	PAID PREPARER'S SIGNATURE			FIRM'S NAME (P	REPARER'S IF	SFI F-	EMPLOYED)				
PL				(I	/ ()	JELI -	20125)				
	PAID PREPARER'S TIN DATE	PAID PI	REPARE	R'S ADDRESS							
If you	re conding a navment with this return, mail to Arizona Departm	nont of Dave	aua DO	Pov 52016 D	hooniy A7 0	5072	2016				

If you are expecting a refund or owe no tax, or owe tax but are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ, 85072-2138.

ARIZONA FORM 140A

Resident Personal Income Tax Return (Short Form)

2004

Y	OUR	FIRST NAME AND INITIAL	LAS	T NAME				YOU	R SOC	CIAL S	ECURITY NO.	
	1											
	1 A JC	INT RETURN, SPOUSE'S FIRST NAME AND INITIAL	LAS	T NAME				SPO	USE'S	SOCI	IAL SECURITY	'NO.
-	_	NT HOME ADDRESS - NUMBER AND STREET, RURAL ROUTE APT. NO.	DAY	TIME PHONE						IMI	PORTANT	^
	2		()							enter your	SSNs.
_		ADDRESS CONTINUED	HOV	/ //E PHONE							onto: you.	00.10.
	2		94	())							
0	ITY, T	OWN OR POST OFFICE STATE ZIP CODE		,				FOR DOR U	SE C	NLY	<i>'</i>	
[3											
· ·	4	Married filing joint return										
Filing Status	5	Head of household - name of qualifying child or dependent:										
S	6	Married filing separate return. Enter spouse's Social Security N	Numb	er above								
ij		and full name here. ▶				88						
	/	Single			_							
ons	8 9 10 11	Enter the Age 65 or over (you and/or spouse)				81		[8	30			
joti	9	number claimed. Do Blind (you and/or spouse)				82 CHECK	ONE	if filing unde	r an	exte	nsion:	
xen	10	not put a Dependents. From page 2, line A2 - do not include									extension	82D
ш		check mark. Qualifying parents and ancestors of your parents.									extension	82F
		Federal adjusted gross income (from your federal return)					$\overline{}$			12		00
		Exemption - Age 65 or over: Multiply the number in box 8 by \$2,100							00	-1		
		4 Exemption - Blind: Multiply the number in box 9 by \$1,500								4		
	1	Exemption - Qualifying parents and ancestors of your parents: Multiply the number in box 11 by \$10,000. 16								4		
/ments.	17	Total subtractions. <i>Add lines 13 through 16</i>				-	$\overline{}$			17		00
Ž	18	Arizona adjusted gross income. Subtract line 17 from line 12								18		00
0 0		Standard deduction. If you checked filing status box 4 or 5, enter \$								19		00
an	20	20 Personal exemptions. See pages 5 and 6 of the instructions								20		00
attach	21	Arizona taxable income. Subtract lines 19 and 20 from line 18. If le	ess than zero, enter zero							21		00
		2 Amount of tax from Optional Tax Rate Tables								22		00
o not	23	- 24 Clean Elections Fund Tax Reduction. See instructions page 6.		231 YOUR	RSEL	F 23 2 □ SPC	USE			24		00
7	125	Reduced tax. Subtract line 24 from line 22								25		00
e but	.I	Family income tax credit from worksheet on page 7 of instructions								26		00
nclose	27	Subtract line 26 from line 25. If less than zero, enter zero								27		00
End	11	Clean Elections Fund Tax Credit. From worksheet on page 7 of the										00
_		Balance of tax. Subtract line 28 from line 27. If line 28 is more than								29		00
returr	30	Arizona income tax withheld during 2004					30 31		00			
e 7e	31	Amount paid with 2004 Arizona extension request (Form 204)					\rightarrow		00	-		
f th	32	Increased Excise Tax Credit from worksheet on page 8 of the instru Property Tax Credit from Form 140PTC	CHOIR)			32		00			
o ex	34	Total payments/credits. Add lines 30 through 33					33			34		00
page	35	TAX DUE. If line 29 is larger than line 34, subtract line 34 from line								35		00
of last	36	OVERPAYMENT. If line 34 is larger than line 29, enter amount of o								36		00
of	37	· · · · · · · · · · · · · · · · · · ·		,								100
ach		Aid to Éducation (entire refund only) 37 00 Arizona Wildlife	38	00	Cit	izens Clean Ele	ction	s 39	00			
to t	37 - 44 Voluntary Gifts to: Aid to Education (entire refund only) Child Abuse Prevention Special Olympics 43 00 Political Gift 44 00 Citizens Clean Elections 39 00 Neighbors Helping Neighbors Helping Neighbors 42 00 Neighbors Helping Neighbors 45 Check only one if making a political gift: 451 Democratic 452 Libertarian 453 Republican											
N-2		Special Olympics 43 00 Political Gift	44	00)	11018	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
chl	45	Check only one if making a political gift: 451 □ Democratic 452 □ Lik	ertar	ian ⊿5 3 □R△	nuhli	can						
4tta	46	Total voluntary gifts: Add lines 37 through 44								46		00
•	47	REFUND. Subtract line 46 from line 36. If less than zero, enter am Direct Deposit of Refund: See instructions.								47		00
		ROLITING NUMBER ACCOUNT NUMBER										155
		98					SC	Checking or Savings	r			
	48	AMOUNT OWED. Add lines 35 and 46. Make check payable to A	rizor	na Departme	nt of	Revenue; inc			ent.	48		00

PLEASE BE SURE TO SIGN THE RETURN ON THE REVERSE SIDE OF THIS PAGE.

Form 140A (2004) Page 2 of 2 PART A: Dependents and Qualifying Parents - do not list yourself or spouse A1 List children and other dependents. If more space is needed, attach a separate sheet. NO. OF MONTHS LIVED SOCIAL SECURITY NO. FIRST AND LAST NAME RELATIONSHIP IN YOUR HOME IN 2004 Enter the names of the dependents listed above who do not qualify as your dependent on your federal return. See page 5 of the instructions. List qualifying parents and ancestors of your parents. If more space is needed, attach a separate sheet. You cannot list the same person here and also on line A1. For information on who is a qualifying parent or ancestor of your parents, see page 5 of the instructions. NO. OF MONTHS LIVED FIRST AND LAST NAME SOCIAL SECURITY NO. RELATIONSHIP IN YOUR HOME IN 2004 PART B: Last Name(s) Used in Prior Years if different from name(s) used in current year **B6** I have read this return and any attachments with it. Under penalties of perjury, I declare that to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. PLEASE SIGN HERE YOUR SIGNATURE DATE SPOUSE'S SIGNATURE DATE PAID PREPARER'S SIGNATURE FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED)

If you are sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ, 85072-2016.

DATE

If you are expecting a refund or owe no tax, or owe tax but are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ, 85072-2138.

PAID PREPARER'S ADDRESS

PAID PREPARER'S TIN

ARIZONA SCHEDULE A(PYN)

Itemized Deductions

For Part-Year Residents

Who also had Arizona source income during the period of the year while a nonresident.

	Attach to your return										
NAME(S	AS SHOWN ON FORM 140PY		YOUR SOC	IAL SECU	JRITY NUMBER						
			000110510								
			SPOUSE'S	SOCIALS	SECURITY NUMBER						
Part I:	t I: Itemized Deductions for the Period of the Year While an Arizona Resident Plus Arizona										
	Source Itemized Deductions for the Period While a Nonresident										
	Medical and Dental Expenses • Taxes • Interest Expense • Gifts to Charity										
	1 Medical and dental expenses incurred and paid while an Arizona resident plus	the amo	unt of such								
	expenses from Arizona sources that you incurred and paid during the part of the										
	Arizona nonresident			. 1	00						
	2 Taxes allowable on federal Form 1040, Schedule A, that you incurred and paid	while ar	Arizona								
	resident plus the amount of such taxes from Arizona sources that you incurred	and paid	d during								
	the part of the year while an Arizona nonresident				00						
	3 Interest expense: See instructions			. 3	00						
	4 Gifts to charity allowable on federal Form 1040, Schedule A, that you incurred	-									
	Arizona resident plus the amount of such gifts from Arizona sources that you in										
	during the part of the year while an Arizona nonresident			. 4	00						
	Casualty and Theft Losses										
	5 Casualty loss(es) allowable on federal Form 1040, Schedule A, after applying			-							
	the 10% federal adjusted gross income limitation and the \$100 per loss floor	. 5		00							
	6 Casualty loss(es) allowable on federal Form 4684 before applying the 10%										
	federal adjusted gross income limitation and the \$100 per loss floor	. 6		00							
	7 Amount of loss on line 6 incurred while you were an Arizona resident plus the										
	amount of loss from Arizona sources on line 6 that you incurred during the			00							
	part of the year while an Arizona nonresident			00 %							
	9 Multiply line 5 by the percentage on line 8				00						
				. 3	00						
	Job Expenses and Other Miscellaneous Expenses 10 Miscellaneous expenses subject to the 2% federal adjusted gross income										
	limitation allowable on federal Form 1040, Schedule A, before applying the										
	limitation	. 10		00							
	11 Amount on line 10 that you incurred and paid while an Arizona resident plus	. 10									
	the amount on line 10 from Arizona sources that you incurred and paid during										
	the part of the year while an Arizona nonresident	. 11		00							
	12 Divide line 11 by line 10, and enter the percentage			%							
	13 Miscellaneous deductions subject to the 2% federal adjusted gross income										
	limit allowable on federal Form 1040, Schedule A, after applying the limitation.	. 13		00							
	14 Multiply line 13 by the percentage on line 12	. 14		00							
	15 Other miscellaneous expenses allowable on federal Form 1040, Schedule A,										
	not subject to the 2% federal adjusted gross income limitation that you										
	incurred and paid while an Arizona resident plus the amount of such										
	expenses from Arizona sources that you incurred and paid during the part of										
	the year while an Arizona nonresident	. 15		00							
	Skip lines 16 through 20 if not deducting gambling losses.										
	16 Wagering losses included on line 15			00							
	17 Total gambling winnings included in your Arizona gross income			00							
	18 Authorized Arizona lottery subtraction from Form 140PY, page 2, line D32			00							
	19 Maximum allowable gambling loss deduction: Subtract line 18 from line 17	. 19		00							
	20 If line 19 is less than line 16, subtract line 19 from line 16; otherwise enter "zero"	. 20		00							
	21 If you completed lines 16 through 20, <i>subtract line 20 from line 15</i> . If you	. 20		00							
	skipped lines 16 through 20, enter amount on line 15 here	. 21		00							
	22 Add lines 14 and 21			. 22	00						

AZ Schedule A(PYN) (2004) Page 2 of 2

	Subtotal of Itemized Deductions		_	
	23 Tentative Arizona itemized deduction: Add lines 1, 2, 3, 4, 9, and 22. If your			
	federal adjusted gross income is more than \$142,700 (\$71,350 if married			
	filing separately), complete lines 24 through 28 below. Otherwise, skip			
	lines 24 through 28	23 0	o	
	24 If your federal adjusted gross income is more than \$142,700 (\$71,350 if			
	married filing separately), enter on line 24 the amount by which you have to			
	reduce your federal itemized deductions because your federal adjusted gross			
	income was over this threshold	24 0	0	
	25 Enter your total federal itemized deductions allowable on federal Form 1040,		Ť	
	Schedule A, prior to the federal adjusted gross income limitation	25 0		
	26 Divide line 23 by line 25, and enter the percentage			
			0	
	27 Multiply line 24 by the percentage on line 26, and enter the result		28	00
	28 Subtract line 27 from line 23, and enter the result		20	
Part II:	Portion of Itemized Deductions Allowable for the Part of the Year			
· artin	While a Nonresident			
	Adjustment to Medical and Dental Expenses			
	29 Medical and dental expenses	29 0	0	
	30 Amount of MSA distributions used to pay qualified medical expenses included			
	on line 29	30 0		
	31 Medical expenses allowed to be taken as a federal itemized deduction		0	
	32 Add lines 30 and 31, and enter the result		0	
		[32]	<u> </u>	
	33 If line 29 is the same as or more than line 32, <i>subtract line 32 from line 29</i> .		22	00
	Otherwise, go to line 34		33	00
	34 If line 32 is more than line 29, subtract line 29 from line 32		34	00
	Adjustment to Interest Deduction			
	35 If you received a federal credit for interest paid on mortgage credit certificates (1			
	8396), enter the amount of mortgage interest you paid for 2004 that is equal to	the amount of		
	your 2004 federal credit		35	00
	Adjustment to Gambling Losses			
	36 Wagering losses allowed as a federal itemized deduction	36 0	0	
	37 Total gambling winnings included in your federal adjusted gross income		0	
	38 Authorized Arizona lottery subtraction from Form 140PY, page 2, line D32		0	
	39 Maximum allowable gambling loss deduction: <i>Subtract line 38 from line 37</i>		0	
	40 If line 39 is less than line 36, <i>subtract line 39 from line 36</i> ; otherwise <i>enter "zero</i>		40	00
			40	
	Adjustment to Property Taxes			
	41 If you are claiming the property tax credit on Arizona Form 302 (Defense Contra			
	the amount of property taxes allowed as a federal itemized deduction for which	a credit is claimed	41	00
	Adjustment to Charitable Contributions			
	42 Amount of charitable contributions for which you are taking a credit under Arizon	na law	42	00
	Adjusted Itemized Deductions			
	43 Add the amounts on lines 33 and 35	43 0	0	
	44 Add lines 34, 40, 41 and 42		0	
	45 Total itemized deductions allowed to be taken on federal return		0	
	46 Enter the amount from line 43 above		0	
	47 Add the amount on lines 45 and 46		0	
	48 Enter the amount from line 44 above		0	
	49 Subtract line 48 from line 47		0	
		43	<u> </u>	
	50 If you skipped lines 24 through 28, enter the amount on line 23 here. If you	[F0]		
	completed lines 24 through 28, enter the amount from line 28 here		0	
	51 Subtract line 50 from line 49	51 0	U	
	52 Arizona percentage from line 4 of the worksheet on page 2 of the		,	
	Schedule A(PYN) instructions	52 %		
	53 Multiply the percentage on line 52 by the amount on line 51	53 0		
	54 Add lines 50 and 53. Enter the result here and on Form 140PY, page 1, line 21		54	00

ARIZONA SCHEDULE A(NR)

Itemized Deductions

For Nonresidents

	Attach to your return				
NAME(S) AS SHOWN ON FORM 140NR		YOUR SOCIAL	SECUR	ITY NUMBER
			SPOUSE'S SO	JIAL SE	CURITY NUMBER
Adjus	tment to Medical and Dental Expenses				
1	Medical and dental expenses	1	00		
	Amount of medical savings account (MSA) distributions used to pay qualified				
	medical expenses included on line 1	2	00		
3	Medical expenses allowed to be taken as a federal itemized deduction	3	00		
4	Add line 2 and line 3, and enter the result	4	00		
5	If line 1 is the same as or more than line 4, subtract line 4 from line 1; otherwise, go to			5	00
6	If line 4 is more than line 1, subtract line 1 from line 4			6	00
Adjus	tment to Interest Deduction				
7	If you received a federal credit for interest paid on mortgage credit certificates (from f	ederal	Form 8396),		
	enter the amount of mortgage interest you paid for 2004 that is equal to the amount of		·		
	federal credit			7	00
Adjus	tment to Gambling Losses				
	Wagering losses allowed as a federal itemized deduction	8	00		
	Total gambling winnings included in your federal adjusted gross income	9	00	1	
	Authorized Arizona lottery subtraction from Form 140NR, page 2, line D27	10	00	1	
11	Maximum allowable gambling loss deduction: Subtract line 10 from line 9	11	00		
12	If line 11 is less than line 8, subtract line 11 from line 8; otherwise enter "zero"			12	00
Adjus	tment to Property Taxes				
13	If you are claiming a property tax credit on Arizona Form 302 (Defense Contracting C	redits),	enter the		
	amount of property taxes allowed as a federal itemized deduction for which a credit is	claime	ed	13	00
Adjus	tment to Charitable Contributions				
14	Amount of charitable contributions for which you are taking a credit under Arizona lav	<i>/</i>		14	00
Itemiz	red Deductions				
15	Add the amounts on lines 5 and 7	15	00		
	Add the amounts on lines 6, 12, 13 and 14	16	00	1	
17	Total federal itemized deductions allowed to be taken on federal return	17	00		
18	Enter the amount from line 15 above	18	00		
19	Add lines 17 and 18	19	00		
20	Enter the amount from line 16 above	20	00	1	
	Adjusted itemized deductions: Subtract line 20 from line 19	21	00	1	
	Enter your Arizona percentage from Form 140NR, page 2, line B16	22	%		
23	Arizona itemized deductions: Multiply line 21 by the percentage on line 22. Enter				
	the result here and on Form 140NP nage 1 line 21			23	100

NOTE: You must attach a copy of federal Form 1040, Schedule A to your return if you itemize your deductions.

2004

ARIZONA SCHEDULE

Itemized Deduction Adjustments

For Full-Year Residents Filing Form 140

Attach to your return NAME(S) AS SHOWN ON FORM 140 YOUR SOCIAL SECURITY NUMBER SPOUSE'S SOCIAL SECURITY NUMBER To itemize on your Arizona return, you must first complete a federal Schedule A. Use Form 140, Schedule A, to adjust the amount shown on the federal Schedule A. Complete Form 140, Schedule A, only if you are making changes to the amount shown on the federal Schedule A. See instructions for details. **Adjustment to Medical and Dental Expenses** 1 Medical and dental expenses..... 00 2 Amount of medical savings account (MSA) distributions used to pay qualified 00 medical expenses included on line 1..... 2 00 Medical expenses allowed to be taken as a federal itemized deduction..... 00 Add line 2 and line 3, and enter the result..... 00 5 If line 1 is the same as or more than line 4, subtract line 4 from line 1; otherwise, go to line 6 6 If line 4 is more than line 1, subtract line 1 from line 4..... 00 **Adjustment to Interest Deduction** 7 If you received a federal credit for interest paid on mortgage credit certificates (from federal Form 8396), enter the amount of mortgage interest you paid for 2004 that is equal to the amount of your 2004 7 00 federal credit......federal credit..... **Adjustment to Gambling Losses** 00 8 Wagering losses allowed as a federal itemized deduction 8 00 9 Total gambling winnings included in your federal adjusted gross income 9 10 00 **10** Authorized Arizona lottery subtraction from Form 140, page 2, line C21 11 Maximum allowable gambling loss deduction: Subtract line 10 from line 9 11 00 00 12 If line 11 is less than line 8, subtract line 11 from line 8; otherwise enter "zero"....... 12 **Adjustment to Property Taxes** 13 If you are claiming a property tax credit on Arizona Form 302 (Defense Contracting Credits), enter the 13 00 amount of property taxes allowed as a federal itemized deduction for which a credit is claimed **Adjustment to Charitable Contributions** 14 00 14 Amount of charitable contributions for which you are taking a credit under Arizona law........ **Other Adjustments** 00 15 Amount allowed as a federal itemized deduction that relates to income not subject to Arizona tax............ **Adjusted Itemized Deductions** 00 16 Add the amounts on lines 5 and 7..... 16 17 00 17 Add the amounts on lines 6, 12, 13, 14 and 15...... 18 00 18 Total federal itemized deductions allowed to be taken on federal return..... 19 Enter the amount from line 16 above 19 00 00 **20** Add lines 18 and 19..... 20 00 21 Enter the amount from line 17 above 22 Arizona itemized deductions: Subtract line 21 from line 20. Enter the result here and on Form 140, page 1, line 18 00

NOTE: You must attach a copy of federal Form 1040, Schedule A, to your return if you itemize your deductions.

ARIZONA FORM Resident Personal Income Tax Return Or fiscal year beginning M M D D 2 0 0 4 and ending M M D D 2 0 0 5. 66

LAST NAME YOUR SOCIAL S YOUR FIRST NAME AND INITIAL YOUR SOCIAL SECURITY NO. 1 IF A JOINT RETURN, SPOUSE'S FIRST NAME AND INITIAL LAST NAME SPOUSE'S SOCIAL SECURITY NO.

L	1									
-	_	ENT HO	OME ADDRESS	S - NUMBER AND STREET, RURAL ROUTE APT. NO.	DAYTIME PHONE: ()	↑ IN	IPORTANT	1	
_=	2				94 HOME PHONE: ()		You mus	You must enter your SSNs.		
-	_						USE ONL	Υ		
Ţ	3									
Filing Status	4			ng joint return						
	5			busehold - name of qualifying child or dependent:						
	6		Married filing separate return. Enter spouse's Social Security Number above							
	L	and full name here. ▶				88				
- 1	, ,		Single							
Exemptions	8		Enter the			81	80			
	9		number claimed. Do not put a			82 CHECK ONE if filing und	der an ext	ension:		
xen	10	Ш				4 month	onth extension 82D			
ule A if required.			check mark.	Qualifying parents and ancestors of your parents.				extension	82F	
			•	d gross income (from your federal return)				1	00	
		Additions to income (from page 2, line B13)							00	
	ı						14		00	
		5 (This line not used.) 6 Subtractions from income (from page 2, line C18 or line C29). Enter the number from line C27a: 161							00	
				I gross income. Subtract line 16 from line 14					00	
Sche				heck box and enter amount. See instructions, pag					00	
ona				tions. See pages 12 and 13 of the instructions					00	
l Ariz				income. Subtract lines 18 and 19 from line 17. If les					00	
and									00	
edule A		Compute the tax using amount on line 20 and Tax Rate Table X, Y or Optional Tax Rate Tables							00	
your federal Sch		23 Subtotal of tax. Add lines 21 and 22							00	
	24	- 25 Clean Elections Fund Tax Reduction. See instructions, page 13. 241 YOURSELF 242 SPOUSE							00	
		Reduced tax. Subtract line 25 from line 23							00	
		7 Family income tax credit from worksheet on page 14 of instructions							00	
tach	28	Cred	its from Ariz	zona Form 301, line 58, or Forms 310, 321 <u>, 32</u> 2, and	required	28		00		
g, at	29	Credits from Arizona Form 301, line 58, or Forms 310, 321, 322, and 323 if Form 301 is not required								
nizin	30			Fund Tax Credit. From worksheet on page 16 of the				00		
If itemizing,	31			Subtract lines 27, 28 and 30 from line 26. If the sum					00	
ıts.	32	Arizo	na income i				00			
not attach	33	2 Arizona income tax withheld during 2004							00	
	25	Arribunit paid with 2004 Arizona extension request (Form 204) Ingrespond Expire Tay Cradit from workshoot on page 17 of the instructions.							00	
	35	increased Excise Tax Credit from worksheet on page 17 of the instructions							00	
	۳۷	Пор	city lax ore	5uit ii 0iii 1 0iiii 1 1 01 1 0					00	
but do		Other refundable credits. Check box(es) and enter amount(s): 37A1 329 37A2 330 Total payments/refundable credits. Add lines 32 through 37							00	
ach W-2 to back of last page of the return. Enclose		TAX DUE. If line 31 is larger than line 38, subtract line 38 from line 31 and enter amount of tax due. Skip lines 40, 41 and 42							00	
		OVERPAYMENT. If line 38 is larger than line 31, subtract line 31 from line 38 and enter amount of overpayment							00	
	ı	1 Amount of line 40 to be applied to 2005 estimated tax							00	
	42				00					
	43	2 Balance of overpayment. Subtract line 41 from line 40								
		Aid to Éducation (entire refund only) 43 00 Arizona Wildlife 44 00 Citizens Clean Elections 45								
		Child	Abuse Preve			Neighbors Helping Neighbors 48	00			
		Special Olympics 49 00 Political Gift 50 00								
		Check only one if making a political gift: ₅₁1□Democratic ₅₁2□Libertarian ₅₁3□Republican								
		Estimated payment penalty and MSA withdrawal penalty							00	
		53 Check applicable boxes: 531 Annualized/Other 532 Farmer or Fisherman 533 Form 221 attached 534 MSA Penalty 54 Total of lines 43, 44, 45, 46, 47, 48, 49, 50 and 52								
	54	4 Total of lines 43, 44, 45, 46, 47, 48, 49, 50 and 52							00	
•	၂၁၁	REFUND. Subtract line 54 from line 42. If less than zero, enter amount owed on line 56							00	
		ROUTING NUMBER ACCOUNT NUMBER C C Checking or								
	56	98 AMO	UNT OWF	D. Add lines 39 and 54. Make check payable to A	rizona Department of	Revenue: include SSN on payr	ment. 56		00	
						man, manade con on pays				

Form 140 (2004) Page 2 of 2

PART A: Dependents and Qualifying Parents - do not list yourself or spouse If completing Part A, also complete Part C, lines C16 and/or C17 and C18. List children and other dependents. If more space is needed, attach a separate sheet. NO. OF MONTHS LIVED FIRST AND LAST NAME SOCIAL SECURITY NO. RELATIONSHIP IN YOUR HOME IN 2004 Enter total number of persons listed in A1 here and on the front of this form, box 10. Also complete Part C below....... TOTAL A2 A2 A3 Enter the names of the dependents listed above who do not qualify as your dependent on your federal return: List qualifying parents and ancestors of your parents. If more space is needed, attach a separate sheet. You cannot list the same person here and also on line A1. For information on who is a qualifying parent or ancestor of your parents, see page 5 of the instructions. NO. OF MONTHS LIVED FIRST AND LAST NAME SOCIAL SECURITY NO. RELATIONSHIP IN YOUR HOME IN 2004 **A5** PART B: Additions to Income Non-Arizona municipal interest 00 **B6** 00 **B7** Early withdrawal of Arizona Retirement System contributions not included on your federal return..... **B7** 00 **B8** Ordinary income portion of lump-sum distributions excluded on your federal return..... **B8 B9** Total federal depreciation..... **B9** 00 **B10** 00 B10 Medical savings account (MSA) distributions. See page 6 of the instructions. 00 **B11** B11 I.R.C. §179 expense in excess of allowable amount. See page 6 of the instructions..... 00 Other additions to income. See instructions and attach your own schedule **B12 B13** 00 B13 Total. Add lines B6 through B12. Enter here and on the front of this form, line 13 PART C: Subtractions from Income Exemption: Age 65 or over. Multiply the number in box 8, page 1, by \$2,100 C14 00 C15 00 C15 Exemption: Blind. Multiply the number in box 9, page 1, by \$1,500 C16 Exemption: Dependents. Multiply the number in box 10, page 1, by \$2,300..... C16 00 Exemption: Qualifying parents and ancestors of your parents. Multiply the number in C17 00 box 11, page 1, by \$10,000..... C17 C18 Total exemptions: Add lines C14 through C17. If you have no other subtractions from income, skip lines C19 through C29 and enter the amount on line C18 on Form 140, Page 1, line 16. C18 00 00 C19 Interest on U.S. obligations such as U.S. savings bonds and treasury bills C19 00 C20 Exclusion for federal, Arizona state or local government pensions (up to \$2,500 per taxpayer)..... C20 00 C21 Arizona state lottery winnings included as income on your federal return (up to \$5,000 only)...... C21 00 C22 C22 U.S. Social Security or Railroad Retirement Act benefits included as income on your federal return C23 00 C23 Recalculated Arizona depreciation 00 C24 C24 Certain wages of American Indians 00 C25 Income tax refund from other states. See instructions C25 00 C26 Deposits and employer contributions into MSAs. See pages 9 and 10 of the instructions..... C26 00 C27 Construction of an energy efficient residence. See page 10 of the instructions. Enter number: C27a ______, then amount...... C27 00 **C28** Other subtractions from income. See instructions and attach your own schedule C28 C29 Total: Add lines C18 through C28. Enter here and on the front of this form, line 16..... C29 Part D: Last Name(s) Used in Prior Years if different from name(s) used in current year D30 I have read this return and any attachments with it. Under penalties of perjury, I declare that to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. PLEASE SIGN HERE YOUR SIGNATURE DATE SPOUSE'S SIGNATURE DATE PAID PREPARER'S SIGNATURE FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED) PAID PREPARER'S TIN DATE PAID PREPARER'S ADDRESS If you are sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ, 85072-2016. If you are expecting a refund or owe no tax, or owe tax but are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ, 85072-2138.

ADOR 91-0011 (04)

ARIZONA FORM

Part-Year Resident Personal Income Tax Return

2004

	'	140PY	Or fiscal year beginning [M M ₁ D D ₁ 2	0 0 4 and end	ding (MMIDDI20 () 5 _] .	66	2004	
Y		FIRST NAME AND I					CIAL SECU	RITY NO.	
	1								
IF	A JC	DINT RETURN, SPOU	JSE'S FIRST NAME AND INITIAL	LAST NAME SPOU			SE'S SOCIAL SECURITY NO.		
[1						1	1	
_	_	ENT HOME ADDRES	S - NUMBER AND STREET, RURAL ROUTE APT. NO.	DAYTIME PHONE: ()			IMPOR	TANT 🛧	
_	2		·	94 HOME PHONE: ()			er your SSNs.	
_	=	TOWN OR POST OF	FICE STATE ZIP CODE	10WL FITONL. (FOR DO			i your corre.	
1	3)		1000	AT OOL T	J.11_1		
	=	Manufact		l	1				
S	4		iling joint return		-				
Filing Status	12	Head of household - name of qualifying child or dependent:							
S	6	1 1	iling separate return. Enter spouse's Social Security	Number above	88				
∄	⊢		ame here. ▶		1				
_	7	Single							
S	8	number 1			81	80			
Exemptions	9	claimed.					g under an extension:		
xem	10	— а спеск	Dependents. From page 2, line A2 - do not includ		-		nth exten		
_ш	÷		Qualifying parents and ancestors of your parents fr		10 T D 11/ D 11/ 14		nth exten	sion 82F	
	-		v Status (check one): 12 Part-Year Resident Oth				1		
			d gross income (from your federal return)			00			
le A			(from page 2, line B19)				15	00	
Jedu			ome (from page 2, line C24)				16	00	
လိုင			d 16				17	00	
zons		(This line not us							
Ari			m income (from page 2, line D36). Enter the number				19	00	
and			d gross income. Subtract line 19 from line 17				20	00	
le A			heck box and enter amount. See instructions, page				21	00	
ne qu			otions. See page 14 of the instructions				22	00	
Sc	23 Arizona taxable income. Subtract lines 21 and 22 from line 20. If less than zero, enter zero.						23 24	00	
eral		24 Compute the tax using Tax Rate Table X or Y						00	
r fe			ure of credits from Arizona Form 301, line 31				25	00	
NO.			Add lines 24 and 25.				26 28	00	
tach		27 - 28 Clean Elections Fund Tax Reduction. See instructions, page 15. 271 YOURSELF 272 SPOUSE						00	
y, atí	29 Reduced tax. Subtract line 28 from line 26.							00	
izin		30 Family income tax credit from worksheet on page 16 of the instructions						00	
item			31	00					
<u>=</u>		Credit type. En							
ents		Clean Elections		33 34	00				
aym		4 Balance of tax. Subtract lines 30, 31 and 33 from line 29. If the sum of lines 30, 31 and 33 is more than line 29, enter zero						00	
상		5 Arizona income tax withheld during 2004						00	
atta		Arizona estimated tax payments for 2004						00	
pot		7 Amount paid with 2004 Arizona extension request (Form 204)						00	
t do			38	00					
e but		Other refundable	39	00					
Enclose		Total payments/	40	00					
Ë		TAX DUE. If lin		41	00				
Œ.		OVERPAYMENT. If line 40 is larger than line 34, subtract line 34 from line 40, and enter amount of overpayment						00	
return								00	
the			payment. Subtract line 43 from line 42			44	00		
ð	45	- 52 Voluntary (lo.	-					
pag		Aid to Edu (entire refu	00	⊣					
of last page		Child Abuse Prev	00	<u> </u>					
		Child Abuse Prevention 48 00 Domestic Violence Shelter 49 00 Neighbors Helping 50 Special Olympics 51 00 Political Gift 52 00 Neighbors Check only one if making a political gift: 531 Democratic 532 Libertarian 533 Republican							
back					54				
\$		Estimated payment penalty and MSA withdrawal penalty						00	
h W-2		Check applicable boxes: 551 Annualized/Other 552 Farmer or Fisherman 553 Form 221 attached 554 MSA Penalt Total of lines 45, 46, 47, 48, 49, 50, 51, 52 and 54							
Attach			, 46, 47, 48, 49, 50, 51, 52 and 54 tract line 56 from line 44. If less than zero, enter amo osit of Refund: See instructions.			56	00		
Ā	57	REFUND. Subi		57	00				
		ROUTING N	ng or						
		98	D Addings 44 and 50	<u> </u>	Saving	s			
	ĮΟδ	AWOUNT OWE	D. Add lines 41 and 56. Make check payable to A	rizona Department of	kevenue; include SSN on pa	ayment.	58	00	

Form 140PY (2004) Page 2 ADOR 91-0069 (04) A1 List children and other dependents. Do not list yourself or spouse. If more space is needed, attach a separate sheet. NO. OF MONTHS LIVED SOCIAL SECURITY NO. FIRST AND LAST NAME RELATIONSHIP IN YOUR HOME IN 2004 Dependents A3 Enter the names of the dependents listed above who do not qualify as your dependent on your federal return: PART A: A4 List qualifying parents and ancestors of your parents. If more space is needed, attach a separate sheet. You cannot list the same person here and also on line A1. For information on who is a qualifying parent or ancestor of your parents, see page 5 of the instructions. NO. OF MONTHS LIVED SOCIAL SECURITY NO. IN YOUR HOME IN 2004 FIRST AND LAST NAME RELATIONSHIP A5 Enter total number of persons listed in A4 here and on the front of this form, box 11. TOTAL Α5 **B6** Dates of Arizona residency: From | M | M | D | D | Y | Y | Y | Y | to | M | M | D | D | Y | Y | Y | Y |. 2004 FEDERAL 2004 ARIZONA Amount from federal return List other state(s) of residency: Amount only B7 Wages, salaries, tips, etc. 00 **B7** 00 Total Income B8 Interest 00 00 **B8 B9** 00 00 B10 Arizona income tax refunds იი 00 B10 00 00 B11 Alimony received..... Percent B12 Business income (or loss) from federal Schedule C..... 00 00 B12 B13 Gains (or losses) from federal Schedule D..... 00 00 B14 Rents, royalties, partnerships, estates, trusts, small business corporations from federal Schedule E
B15 Other income reported on your federal return...... 00 00 00 00 B15 00 00 B16 Total income: Add lines B7 through B15..... **B16** PART 00 00 B17 Federal adjustments. Attach your own schedule..... B17 00 B19 Arizona income: Subtract line B17 from line B16 in the ARIZONA column. Enter here and on the front of this form, line 15 **B19** 00 % B20 Arizona percentage: Divide line B19 by line B18, and enter the result (not over 100%)..... **B20** C21 C21 Early withdrawal of Arizona Retirement System contributions..... იი C22 Total depreciation included in Arizona gross income C22 00 C23 Other additions to income. See instructions and attach your own schedule..... C23 00 C24 Total: Add lines C21 through C23. Enter here and on the front of this form on line 16...... C24 00 D25 Exemption: Age 65 or over. Multiply the number in box 8, page 1, by \$2,100..... 00 D26 00 D26 Exemption: Blind. Multiply the number in box 9, page 1, by \$1,500..... 00 D27 D27 Exemption: Dependents. Multiply the number in box 10, page 1, by \$2,300..... 00 **D28** Exemption: Qualifying parents and ancestors. *Multiply the number in box 11, page 1, by \$10,000...* D28 Subtractions 00 D30 Multiply line D29 by the percentage on line B20, and enter the result...... D30 D31 Interest on U.S. obligations such as U.S. savings bonds and treasury bills included in the ARIZONA column...... 00 **D31** D32 D32 Arizona state lottery winnings included on line B15 in the ARIZONA column (up to \$5,000 only)..... 00 00 D33 U.S. Social Security or Railroad Retirement Act benefits included in your ARIZONA income...... **D33** Ъ D34 Construction of an energy efficient residence. See page 10 of instructions. Enter number D34a , then amount............. D34 00 D35 Other subtractions from income. See instructions and attach your own schedule D35 00 00 D36 Total: Add lines D30 through D35. Enter here and on the front of this form, line 19..... E37 Last name(s) used in prior years if different from name(s) used in current year: I have read this return and any attachments with it. Under penalties of perjury, I declare that to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. PLEASE SIGN HERE YOUR SIGNATURE DATE SPOUSE'S SIGNATURE DATE PAID PREPARER'S SIGNATURE FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED) PAID PREPARER'S TIN DATE PAID PREPARER'S ADDRESS

If you are sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ, 85072-2016.

If you are expecting a refund or owe no tax, or owe tax but are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ, 85072-2138.